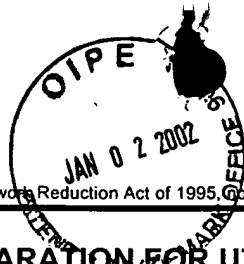


#3



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing  
OR  
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 555255012287

First Named Inventor Jason T. Griffin

**COMPLETE IF KNOWN**

Application Number /

Filing Date

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DUAL-MODE MOBILE COMMUNICATION DEVICE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

David B. Cochran, Esq.  
Name

Jones, Day, Reavis & Pogue  
Address North Point, 901 Lakeside Avenue

Cleveland Ohio 44114-1190  
City State ZIP

USA (216) 586-7029 (216) 579-0212  
Country Telephone Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Jason T.  
Given Name  
(first and middle [if any])

Griffin  
Family Name  
or Surname

Inventor's  
Signature

Date

Oct 12<sup>th</sup>, 2001

Residence: City

Waterloo

State

Ontario

Country

Canada

US and Canadian  
Citizenship

295 Phillip Street  
Mailing Address

Waterloo  
City

Ontario  
State

N2L 3W8  
ZIP

Canada  
Country

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Mihal  
Given Name  
(first and middle [if any])

Lazaridis  
Family Name  
or Surname

Inventor's  
Signature

Date

Oct 22, 01

Residence: City

Waterloo

State

Ontario

Country

Canada

Canadian  
Citizenship

295 Phillip Street  
Mailing Address

Waterloo  
City

Ontario  
State

N2L 3W8  
ZIP

Canada  
Country

☐ Additional inventors are being named on the \_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.